



**CITY OF GUNNISON
TRANSIENT MERCHANT'S LICENSE
APPLICATION/LICENSE**

Vendor Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Date(s) of Sale(s): _____

Location of Sale(s): _____

Type of business, goods and/or services:

**LIST THE NAME AND ADDRESS OF EACH EMPLOYEE OR AGENT WHO WILL
ENGAGE IN THE BUSINESS, GOODS AND/OR SERVICES:**

NAME

ADDRESS

_____	_____
_____	_____
_____	_____
_____	_____

Colorado State Sales Tax License No.: _____

City of Gunnison Sales Tax License No.: _____

Vehicle License No.: _____ Driver's License No.: _____

Bond (\$1,000): _____ Expiration Date: _____ Application Fee (\$50.00): _____

Cash Bond (\$1,000): _____

Written evidence of authorization to use location of sale: _____

Transient Merchant Sponsor:

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

City Clerk

Vendor Signature

Date

Date

Expiration Date: _____

**CITY OF GUNNISON
TRANSIENT MERCHANT SPONSOR AGREEMENT**

Pursuant to Chapter 8, Article 3, Of the City of Gunnison Municipal Code, Gunnison, Colorado, the undersigned presently established and doing business as a local business agree to sponsor the following transient merchant and his agents and/or employees.

NAME

ADDRESS

Date(s) of sale(s): _____

Location of sale(s): _____

Type of business, goods and/or services: _____

_____ I am a local government, a Gunnison County non-profit organization, civic organization, or church.

_____ I agree to take responsibility for the business related acts of the transient merchant and each agent or employee thereof.

_____ I agree to guarantee payment of all City, County, and State taxes due or judgement rendered against the transient merchant as a result of the business.

_____ I agree to act as the transient merchant's agent for service of process and handling of warranty and customer complaints.

_____ I agree to be liable for any zoning violations.

Name of Sponsor: _____

By: _____

Date: _____

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